



Corres. and Mail
BOX AF

AFI 2674
2700

In re Application of:

YOSHIHIRO TERASHIMA ET AL.

Application No.: 09/177,572

Filed: October 23, 1998

For: MEMORY CONTROLLER AND
LIQUID CRYSTAL DISPLAY
APPARATUS USING THE SAME

Docket No. 35.C13035

Examiner: K. Nguyen

Group Art Unit: 2674

September 20, 2001

RECEIVED
SEP 24 2001
Technology Center 2600

COMMISSIONER FOR PATENTS
BOX AF
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment And Petition For Extension Of Time in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 4	MINUS	** 20	= 0	x\$18	\$ -0-
INDEP. CLAIMS	* 2	MINUS	*** 3	= 0	x \$40 \$80	\$ -0-
Fee for Multiple Dependent claims \$135/\$270						\$ -0-
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$_____ is enclosed.

☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

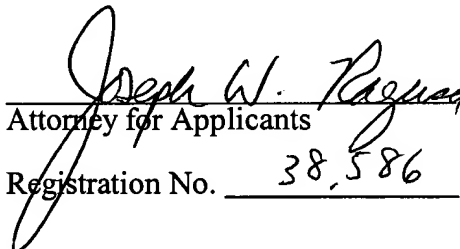
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Assistant Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$_____ to cover the fee for a ____ month extension is enclosed.

☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicants
Registration No. 38,586

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200